

Docket No.: 100727-53/Heraeus 405-KGB

P10110US

## COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I/we hereby declare that:

am/we are the original, first	and sole inventor (if on nes are listed below) of t	are as stated below next to make is listed below) the subject matter which is contact the subject matt	or an original, first and	
DEVICE FOR ELE DENTAL COMPO		METALLIC, PROSTHETIC	C, MOLDED,	
the specification of which is	being filed herewith, or	•		
was filed on July 28, 2003	<u> </u>			
under Serial Number 10/62	28,828 , and			
I/we hereby state that I/v specification, including the		understand the contents of	f the above identified	
I/we acknowledge the duty in accordance with Title 37,		hich is material to the examinutions $\S1.56(a)$ .	ation of this application	
application(s) for patent or	inventor's certificate liste	Title 35, United States Coded below and have also idented a filing date before that of the	ified below any foreign	
Prior Foreign Application(s)			Priority Claimed	
102 34 285.7 (Number)	Germany (Country)	26 July 2002 (Day/Month/Yr. Filed)	⊠ yes □ no	
(Number)	(Country)	(Day/Month/Yr. Filed)	□ yes □ no	
I/we hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I/we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:				
(Application Serial No.)	(Filing Date)	•	(Status) (patented, pending, abandoned)	
(Application Serial No.)	(Filing Date)		(Status) (patented, pending, abandoned)	

Application No. 10/628,828
Applicant Wulf BRAMER et al
COMBINATION DECLARATION AND POWER OF ATTORNEY
Page 2 of 2



I/we hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**POWER OF ATTORNEY:** As a named inventor, I/we hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Kurt G. Briscoe, Reg. No. 33,141; William C. Gerstenzang, Reg. No. 27,552; Lorimer P. Brooks, Reg. No. 15,155; Bruce Londa, Reg. No. 33,531; Christa Hildebrand, Reg. No. 34,953; Howard C. Lee, Reg. No. 48,104; Theodore Gottlieb, Reg. No. 42,597; Andrew N. Parfomak, Reg. No. 32,431; and David D. Kim, Reg. No. 53,123 all of 220 East 42<sup>nd</sup> Street, 30<sup>th</sup> Floor, New York, New York 10017; William R. Robinson, Reg. No. 27,224; Davy E. Zoneraich, Reg. No. 37,267; Mark A. Montana, Reg. No. 44,948 and Robert A. Hyde, Reg. No. 46,354, of 721 Route 202-206, Bridgewater, New Jersey 08807, my attorneys and/or agents with full power of substitution and revocation.

SEND CORRESPONDENCE TO: NORRIS, McLAUGHLIN & MARCUS 220 EAST 42<sup>ND</sup> STREET - 30<sup>TH</sup> FLOOR NEW YORK, NEW YORK 10017 **DIRECT TELEPHONE CALLS TO:** 

(212) 808-0700

FULL NAME OF SOLE OR FIRST INVENTOR: Dr. WULF BI	RÄMER / DA.04			
INVENTOR'S SIGNATURE:	DATE:			
RESIDENCE: Georg-Kerschensteiner-Str. 1, 63486 Bruchköbel, Germany	CITIZENSHIP German			
FULL NAME OF SECOND INVENTOR: Dr. ULRICH KOOPS				
INVENTOR'S SIGNATURE: / www the	DATE: 12.01.04			
RESIDENCE: Nordhäuser Straße 13, 64380 Roßdorf, Germany	CITIZENSHIP: German			
FULL NAME OF THIRD INVENTOR: STEPHAN SCHMID				
INVENTOR'S SIGNATURE: Schan Lund	DATE: 12.1.04			
RESIDENCE: Sudetenstrasse 20, 63695 Glauburg, Germany	CITIZENSHIP: German			
FULL NAME OF FOURTH INVENTOR:				
INVENTOR'S SIGNATURE:	DATE:			
RESIDENCE:	CITIZENSHIP:			